

EXHIBIT 13

UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA

MARK SNOOKAL, an individual,

Plaintiff,

Case No.

vs.

2:23-cv-6302-HDV-AJR

CHEVRON USA, INC., a California
Corporation, and DOES 1 through 10,
inclusive,

Defendants.

DEPOSITION OF DR. UJOMOTI AKINTUNDE

OCTOBER 31, 2024

CONDUCTED VIA ZOOM VIDEOCONFERENCE

REPORTED BY LAUREN RAMSEYER, CSR NO. 14004

Dr. Ujomoti Akintunde

October 31, 2024

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UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA

MARK SNOOKAL, an individual,
Plaintiff, Case No.
vs. 2:23-cv-6302-HDV-AJR
CHEVRON USA, INC., a California
Corporation, and DOES 1 through 10,
inclusive,
Defendants.

DEPOSITION OF DR. UJOMOTI AKINTUNDE,
commencing on Thursday, October 31, 2024, at 8:00 a.m.,
Pacific Time, held via Zoom videoconference, all
participants appearing remotely before Lauren Ramseyer,
Certified Shorthand Reporter, CSR No. 14004.

Dr. Ujomoti Akintunde

October 31, 2024

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Dr. Ujomoti Akintunde

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ALSO PRESENT: EGUONO ERHUN

Dr. Ujomoti Akintunde

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1 Q. Okay. In your practice as a cardiologist,
2 have you ever treated an aortic aneurysm that ruptured?

3 A. No.

4 Q. In your practice as a cardiologist, have you
5 ever treated an aortic aneurysm that dissected?

6 A. No.

7 Q. Do you have a current curriculum vitae or
8 resume?

9 A. I would have to update it. I have not applied
10 for any job since I started working at Chevron.

11 Q. Okay. So the most recent version would be
12 from around 2018?

13 A. Approximately. There have been some updates
14 along the line of -- definitely it's not -- it's not
15 recent. I do not have it current.

16 Q. In your work as a cardiologist, have you ever
17 treated someone with a dilated aortic root?

18 A. Yes.

19 Q. How many people do you think that you've
20 treated with a dilated aortic root?

21 A. I cannot remember. I didn't do counts.

22 Q. I understand. What's your best estimate? Is
23 it between five and ten, ten and 20, over a hundred?
24 You know, what sort of would be your best estimate of
25 the range of the number?

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1 MS. FAN: Objection. Vague and ambiguous.

2 THE WITNESS: I can't remember. I'm not so
3 sure how many, but I have managed them in the past.
4 They're not as common in this part of the world.

5 BY MS. FLECHSIG:

6 Q. In the last year, how many patients with a
7 dilated aortic root have you -- have you treated?

8 A. A couple. I'm not sure exactly.

9 Q. Since joining Chevron in 2018, how many people
10 with a dilated aortic root have you -- have you seen?

11 MS. FAN: Vague and ambiguous as to "Chevron."

12 THE WITNESS: I'm not certain of the exact
13 number, but I've seen a few.

14 BY MS. FLECHSIG:

15 Q. So I want to turn now to Mark Snookal, the
16 plaintiff in this case. Have you ever spoken with
17 Mr. Snookal?

18 A. No.

19 Q. Have you ever reviewed a job description for
20 the position that Mr. Snookal was seeking in Escravos?

21 A. No.

22 Q. Did you have any work history, for
23 Mr. Snookal, to review?

24 A. No. That's not within my purview as a
25 cardiologist. That's managed by the occupational health

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1 physician.

2 Q. Okay. I think I want to just go ahead and
3 turn towards the email that I believe you were referring
4 to earlier. I'm going to put the document in the chat
5 so that you can scroll through it at your leisure, just
6 give me one moment to give you the file.

7 (Exhibit 1 was marked for identification.)

8 BY MS. FLECHSIG:

9 Q. So I'm marking as Exhibit 1 what's been
10 provided as CUSA000771 through 000775.

11 Dr. Akintunde, please go ahead and open the
12 document, and you're welcome to take a moment to look
13 through it. And then you can let me know when you're
14 done.

15 A. I've looked through it.

16 Q. Okay. Is this the email that you were
17 referring to earlier in terms of the document you
18 reviewed to prepare for your deposition today?

19 A. Yes.

20 Q. Is this the entire email thread that you had
21 with Dr. Asekomeh relating to Mr. Snookal?

22 A. Yes.

23 Q. Okay. Other than this email, did you discuss
24 Mr. Snookal with Dr. Asekomeh at any other time?

25 A. I don't recall at all. That was five years

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1 A. Two imaging reports.

2 Q. Okay.

3 A. The CT and the echo.

4 Q. Okay. So this email thread, it looks like
5 Dr. Asekomeh sent the first email to you on, let's
6 see -- on August 6th, 2019; is that correct, he
7 forwarded you the thread?

8 A. I think it was August 7th.

9 Q. So I'm looking at --

10 A. Oh, maybe it was the 6th. I can't remember.
11 It's possible.

12 Q. That's okay. I'm not trying to trick you.
13 I'm just trying to get a good sense of the timeline in
14 terms of what the document says.

15 So on the first page of the document,
16 CUSA000771, it looks like there's an email from
17 Dr. Asekomeh. It says sent Tuesday, August 6, 2019,
18 12:35 to Akintunde, and then it looks like your Chevron
19 email. Is that -- are you seeing what I'm reading out?

20 A. Yes.

21 Q. Okay. So that was what you received from
22 Dr. Asekomeh relating to Mr. Snookal, correct?

23 A. Yes, that's correct.

24 Q. Okay. And so when you received that email,
25 you did not also receive the medical summary that's on

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1 the last page of this thread?

2 A. No.

3 Q. Okay. So I understand you received just -- I
4 think you said two imaging reports, right?

5 A. Yes. Yes.

6 Q. Apologies if I already asked this. What were
7 the imaging reports of?

8 A. Echo, cardiology, and CT scan.

9 Q. Okay. And so I see in your response email, if
10 you scroll up so we're still on 771, the first page of
11 the document, in this -- this is the email response that
12 you wrote to Dr. Asekomeh, correct?

13 A. Yes.

14 Q. Okay. So just going down the -- going down in
15 order of what you wrote, you said, "I concur with my
16 colleagues." That was in reference to the remainder of
17 the email thread, right?

18 A. Yes.

19 Q. And then you say he is, quote, low risk, but
20 not low risk, correct?

21 MS. FAN: Objection. Misstates the document.

22 THE WITNESS: Correct.

23 MS. FAN: Counsel, I think you might have
24 flipped those terms.

25

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1 Lagos. So I would say it was more general cardiology.

2 Q. For people that you were treating with
3 hypertension, what were you doing for them?

4 A. Clinical exams, review of their medications,
5 EKGs, when required.

6 Q. Okay. And that was on location at Escravos,
7 correct?

8 A. Correct.

9 Q. I think you said that you didn't have all of
10 your cardiology equipment available at Escravos. What
11 equipment was not available while you were in Escravos?

12 A. There's no intensive care unit at Escravos, no
13 echo machines. It's just a basic clinic.

14 Q. Okay. While you were in Escravos, did you
15 have any medical emergencies that required emergency
16 evacuation?

17 A. Yes.

18 Q. How many?

19 A. I don't think I'm allowed to give that kind of
20 data.

21 Q. Well, the attorneys haven't objected. I
22 don't -- I personally think it's fine. It's not
23 something that is specific. So just to clarify the
24 scope, you don't need to identify the person or anything
25 like that. I'm just wondering how many emergency

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1 medical evacuations took place while you were there.

2 A. In a week, maybe two. Maybe one or two.

3 Sometimes less; sometimes more.

4 Q. So one to two per week would be your best
5 estimate of the average emergency medical evacuations?

6 A. Yeah. It would just -- it should be an
7 estimate.

8 Q. Do you know what would happen during those
9 medical evacuations, like do you know how they were
10 evacuated?

11 MS. FAN: Objection.

12 THE REPORTER: I'm sorry, what was the
13 objection?

14 MS. FAN: It was vague and ambiguous.

15 BY MS. FLECHSIG:

16 Q. You can go ahead, Dr. Akintunde, or I can -- I
17 can say the question again.

18 A. Can you please say the question again?

19 Q. Yeah. When someone needed to be medically
20 evacuated on an emergency basis, do you know how the
21 evacuation took place, like how were they evacuated?

22 A. By chopper.

23 Q. Okay. Is that true for all of the medical
24 evacuations that took place while you were in Escravos?

25 A. Most of them.

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1 Q. Okay. For the ones that were not evacuated by
2 chopper, how were they evacuated?

3 A. So if they needed referrals, but not really
4 those kind of emergencies, we would put them on a
5 regular flight.

6 Q. Okay. When you say a "regular flight," are
7 those -- those are, like, fixed wing airplanes that are
8 coming and going from Escravos?

9 A. I'm not sure I know what fixed wing is, but
10 regular airplanes that are coming in and out of
11 Escravos.

12 Q. How often are regular airplanes coming and
13 going from Escravos?

14 A. At least three times a week.

15 Q. Okay. For the people that needed to be
16 emergency evacuated by chopper, do you know how quickly
17 they were able to get onto the helicopter for
18 evacuation?

19 MS. FAN: Objection. Vague and ambiguous.

20 I apologize, Dr. Akintunde. You can go ahead.

21 THE WITNESS: That varied a lot. Back then it
22 was a company in Escravos, so sometimes evacuations were
23 delayed. Sometimes a chopper wasn't regularly
24 available, you had to wait for one to come back, so that
25 varied a lot. There's no one size fits all.

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1 MS. FLECHSIG: Yeah, absolutely. I think I
2 just have a couple more questions on this point, and
3 then we can do a little break.

4 MS. FAN: Great.

5 BY MS. FLECHSIG:

6 Q. I know you mentioned it could vary a lot in
7 terms of the time it took to get, you know, a chopper to
8 the site. What was the average time you think that it
9 took to get someone on to the helicopter for evacuation?

10 MS. FAN: Objection. Vague and ambiguous.
11 Calls for speculation.

12 THE WITNESS: How much time? Maybe an hour
13 and a half. I think about that. That's just an
14 approximation.

15 MS. FLECHSIG: Okay. All right. Do we want
16 to take a five-minute break, a ten-minute break?

17 MS. FAN: I think five minutes should work.

18 MS. FLECHSIG: Is that okay with everyone?

19 THE WITNESS: That's fine.

20 THE REPORTER: That's fine with me.

21 MS. FLECHSIG: Okay. Thank you so much.

22 MS. FAN: Great. We can go off the record.

23 THE REPORTER: We're off the record.

24 (Recess.)
25

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1 identifying details.

2 A. Yes, I did see a hand injury, trauma, you
3 know, yes, a hand injury. Yeah, very few, but I did
4 see, yes, a hand injury.

5 Q. What -- were there any other traumas that you
6 treated while you were in Escravos?

7 MS. FAN: Objection. Vague and ambiguous.

8 THE WITNESS: I can't remember, but I guess --
9 I think -- I think somebody while playing sports on the
10 field, I can't remember what -- we did see some mild
11 trauma, maybe muscle, you know, twisting the muscle or
12 something, yeah. There were some, definitely.

13 BY MS. FLECHSIG:

14 Q. Okay. During the time you were in Escravos,
15 was anyone injured because of a medical evacuation, in
16 other words, was anyone injured due to the process of an
17 emergency medical evacuation?

18 A. No.

19 Q. Does a dilated aortic root pose a physical
20 danger to anyone other than the person who has the
21 dilated aortic root?

22 MS. FAN: Objection. Vague and ambiguous.
23 Incomplete hypothetical. Calls for a legal conclusion.

24 THE WITNESS: No.
25

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1 MS. FAN: Objection. Argumentative.

2 THE WITNESS: Well, size is important, so the
3 risk is lower that it would dissect or rupture, but it
4 may also -- that may also occur, even at the current
5 size; that is why there is a risk category to it. So
6 you really want to make sure, like I said, as a
7 physician, my priority one is the health and wellbeing
8 of every patient, so I also want to make sure all the
9 factors that may potentially increase the risk of this
10 person are doing well, are put into perspective and
11 addressed.

12 BY MS. FLECHSIG:

13 Q. In your email did you intend to express any
14 opinion about whether it was safe for Mr. Snookal to
15 work in Escravos?

16 A. That's not within my sphere of work. My
17 communication was strictly cardiology, about the signs,
18 and its possible issues that may arise. Nothing within
19 my sphere of work allows me to determine suitability for
20 work or otherwise.

21 Q. For someone with an aortic root of
22 4.2 centimeters, is that a situation where you would
23 recommend surgical intervention?

24 A. I would not recommend surgical intervention at
25 that size except he didn't have symptoms.

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1 Q. What are --

2 A. If he has no symptoms, then I would say no to
3 surgery at that time.

4 Q. What are symptoms of a dilated aortic root?

5 A. Tearing chest pain, blood pressure will drop,
6 amongst others.

7 Q. Okay. What are the others, if you know?

8 A. There are so many, like, I won't go into all
9 of that right now, but they are listed in the email
10 trail there, so...

11 Q. Okay. I think I see in -- I think I see what
12 you're referring to in the email trail from Dr. Aiwuyo,
13 he says, "Watch out for alarm symptoms like pain in the
14 chest, throbbing, tearing, aching or sharp pain, often
15 sudden; pain in the back, nausea, vomiting, fainting and
16 systemic shock."

17 Is that -- are those the symptoms that you're
18 referring to?

19 A. Yes.

20 Q. Just to clarify, those symptoms, does that
21 indicate a dissection or rupture, or is that just what a
22 symptomatic aortic root is?

23 A. It can indicate either one of them, and all of
24 that refers to symptomatic pieces.

25 Q. And, honestly, I'm just asking because I'm not

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1 review -- strike that.

2 I want to ask about -- I actually want to ask
3 about the CT scan and the echocardiogram that you said
4 were attached to Dr. Asekomeh's email. Do you know what
5 I'm referring to?

6 A. Yes.

7 Q. The CT scan, was it just one CT scan, or were
8 there multiple CT scans?

9 A. So I remember correctly it was one CT.

10 Q. Okay. For the echocardiogram, was that
11 attachment -- or were there attachments that were
12 multiple echocardiogram or just one echocardiogram?

13 A. I recall one echocardiogram.

14 Q. Okay. So based off of the information that
15 you had available to you, did you consider whether
16 Mr. Snookal's aortic root dilation was stable in size?

17 A. I cannot make a determination about if it was
18 stable in size from only one imaging report. I would
19 have to see a series, a sequence, a series of them to
20 determine the rate of increase over the years.

21 Q. Okay. So in other words, no one provided you
22 with any information about any changes in size?

23 A. I was given only one set of imaging reports.

24 Q. Okay. In this email thread at the bottom of
25 page 774, so CUSA000774, I want to -- I want to give you

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1 The engineers who work there can probably give more
2 information about that.

3 Q. In Exhibit 1, there is a link from Dr. Aiwuyo
4 on the second page of the document, so it's CUSA000772.
5 Do you see what I'm referring to?

6 A. I'm going there. Yes, I see the link.

7 Q. Did you -- did you review the contents of the
8 link?

9 A. I cannot remember.

10 Q. Is there -- your conclusion was that
11 Mr. Snookal, given the size of his aortic root dilation,
12 would be considered low risk, right?

13 A. Yes.

14 Q. Do you know at what -- is there a certain size
15 where someone becomes high risk?

16 A. So those risk measurements are based on a
17 population level. So higher risk is determined by the
18 level, the size at which you're referred for surgery.
19 And referring for surgery is what determines high risk,
20 so that's where the division comes in, except the person
21 has smaller sizes and has become symptomatic, then that
22 changes their risk categories. So it's -- it's -- those
23 are the variables. It's not one definition. Most of
24 the time higher risk refers to the size.

25 Q. At what size does someone become high risk, if

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REPORTER'S CERTIFICATE

I, Lauren Ramseyer, Certified Shorthand Reporter licensed in the State of California, License No. 14004, hereby certify that the deponent was by me first duly sworn and the foregoing testimony was reported by me and was thereafter transcribed with Computer-Aided Transcription; that the foregoing is a full, complete, and true record of said proceedings.

I further certify that I am not of counsel or attorney for either or any of the parties in the foregoing proceeding and caption named or in any way interested in the outcome of the cause in said caption.

The dismantling, unsealing, or unbinding of the original transcript will render the reporter's certificate null and void.

In witness whereof, I have hereunto set my hand this day: November 19, 2024.

A handwritten signature in black ink, reading "Lauren Ramseyer", is written over a horizontal line.

Lauren Ramseyer, CSR No. 14004

EXHIBIT 14

UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA

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MARK SNOOKAL, an individual,)	
)	
Plaintiff,)	
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vs.)	Case No.
)	2:23-cv-6302-HDV-AJR
CHEVRON USA, INC., a California)	
Corporation, and DOES 1 through)	
10, inclusive,)	
)	
Defendants.)	
_____)	

DEPOSITION OF

DR. VICTOR ADEYEYE

Volume 1, Pages 1 - 34

Taken Remotely Via Videoconference

Friday, November 15, 2024

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Renee M. Bencich, CSR No. 11946, RPR

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Job Number 117195

Dr. Victor Adeyeye

November 15, 2024

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Paris Stephen, Attorney at Law
Allred, Maroko & Goldberg

Eguono Erhun, Attorney at Law
Chevron Nigeria Limited

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QUESTIONS INSTRUCTED NOT TO ANSWER
(None.)

QUESTIONS MARKED
(None.)

CONFIDENTIAL PORTIONS
(None.)

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1 College of Surgeon, ATLS, Advanced Trauma Life Supports.

2 I also have American College of Physician,
3 Advanced Cardiovascular Life Supports.

4 Also, Basic Life Supports for America.

5 Then, luckily, too, I have Health Management
6 Certification of Nigerian Postgraduate Medical College,
7 and a Physician of Emergency Medicine, Nigeria, where I
8 also have a certification.

9 Thank you.

10 Q. Have you ever treated any patients with a
11 thoracic aortic aneurysm?

12 A. In the course of my treating, I've had one case
13 of such.

14 Q. Okay. When was that?

15 A. That was between 2010 to 2012.

16 Q. Okay. Do you know whether that patient had a
17 descending aortic aneurysm or an ascending aortic
18 aneurysm?

19 A. Aortic roots aneurysm. That was the patient's
20 type.

21 Q. Okay. Is -- since I'm a layperson, is that --
22 does that mean it's an ascending or --

23 A. Yes --

24 Q. -- descending?

25 A. -- yes, yes. Ascending. Ascending.

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1 a follow-up patient. Nothing could be done.

2 Ruptured, and that was the --)

3 THE COURT REPORTER: There was more.

4 THE WITNESS: Mortality. Death. Death.

5 THE COURT REPORTER: Thank you.

6 BY MS. FLECHSIG:

7 Q. So was the patient alive when they first came
8 to you?

9 A. Yes.

10 Q. Understood.

11 Were you able to administer any treatments to
12 the patient before they passed away?

13 A. The treatment could not be given. Not
14 available.

15 Q. Understood.

16 Do you have a current curriculum vitae or a
17 resume?

18 A. Have but not updated.

19 Q. Okay. Do you know when you would have last
20 updated it?

21 A. Over a year ago.

22 Q. Have you published any medical research during
23 the last 10 years?

24 A. Two contributions to textbooks of medicine with
25 over 20 publications in local and international

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1 figure to that. Not only consultation, even medevac
2 cases that require expats' management as a supporting
3 facility to offshore -- location. Thank you.

4 THE COURT REPORTER: To offshore? Doctor, to
5 offshore what location?

6 THE WITNESS: Offshore location. Offshore.
7 Offshore. Escravos. Offshore Escravos. Escravos.
8 Escravos. Escravos location. Offshore Escravos
9 location.

10 Thank you.

11 BY MS. FLECHSIG:

12 Q. Okay. You have never spoken to Mark Snookal,
13 the plaintiff in this case, correct?

14 A. Never spoken with him.

15 Q. Okay. Have you ever reviewed Mr. Snookal's
16 employment history?

17 A. Employment history?

18 Q. Yes.

19 A. Or medical history?

20 Q. No, have you ever reviewed his employment
21 history?

22 A. Oh, that's not within my scope.

23 Q. Okay. So, no, you have not reviewed his
24 employment history, correct?

25 A. Yes.

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1 MS. FAN: Asked and answered.

2 BY MS. FLECHSIG:

3 Q. That's a -- you said yes?

4 A. I've never reviewed his employment history.

5 Q. Thank you.

6 You mentioned also giving treatment in response
7 to medical evacuations.

8 A. Yes.

9 Q. Do you -- do you treat people who have been
10 medevaced from Escravos, Nigeria?

11 A. Yes.

12 Q. How often do you treat people who have been
13 medevaced on an emergency basis from Escravos, Nigeria?

14 A. Putting specific number is difficult because
15 not all cases are medevaced. Many cases are, based
16 on --

17 THE COURT REPORTER: Based --

18 THE WITNESS: Expats advised. Based on expat
19 advised.

20 BY MS. FLECHSIG:

21 Q. Okay. Can you give me your best estimate of
22 how often on average you treat someone who has been
23 evacuated from Escravos on an emergency basis? Just
24 approximately.

25 A. That varies. In a year -- it's -- it's quite

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UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA

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MARK SNOOKAL, an individual,)
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CHEVRON USA, INC., a California)
Corporation, and DOES 1 through)
10, inclusive,)
Defendants.)
)

REPORTER'S CERTIFICATION
ORAL DEPOSITION OF
DR. VICTOR ADEYEYE
Volume 1, Pages 1 - 34
Friday, November 15, 2024

I, RENÉE M. BENCICH, Certified Shorthand Reporter in and for the State of California, hereby certify to the following:

That the witness, DR. VICTOR ADEYEYE, was duly sworn by the officer and that the transcript of the oral deposition is a true record of the testimony given by the witness;

I further certify that pursuant to FRCP Rule 30(e)(1) that the signature of the deponent:


(XX) was requested by the deponent or a party before the completion of the deposition and returned within 30 days from date of receipt of the transcript. If returned, the attached Changes and Signature Page contains any changes and the reasons therefor;

() was not requested by the deponent or a party before the completion of the deposition.

I further certify that I am neither attorney nor counsel for, related to, nor employed by any of the parties to the action in which this testimony was taken.

Further, I am not a relative or employee of any attorney of record in this cause, nor do I have a financial interest in the action.

Subscribed and sworn to on this the 1st day of December, 2024.



RENÉE M. BENCICH, CSR, RPR
California License No. 11946

EXHIBIT 15

UNITED STATES DISTRICT COURT

CENTRAL DISTRICT OF CALIFORNIA - WESTERN DIVISION

MARK SNOOKAL, an individual,)

)

)

Plaintiff,)

)

)

vs.)

CASE No.

)

2:23-cv-6302

)

HDV-AJR

CHEVRON USA, INC., a California)

Corporation and DOES 1 through)

10, inclusive,)

)

)

Defendants.)

)

Videotaped Remote Deposition via Zoom videoconference
of SHAHID HAMEED KHAN, M.D., taken on behalf of Defendant
Chevron USA, Inc., at Culver City, California, commencing
at 2:06 p.m., Monday, February 10, 2025, before Marivon H.
Christine, CSR No. 3735.

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13
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16 Blake Jones, Videographer
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I N D E X

DEPONENT	EXAMINED BY	PAGE
SHAHID HAMEED KHAN, M.D.	MS. KENNEDY	5
		42
	MS. FLECHSIG	25

EXHIBITS FOR IDENTIFICATION:

1	Kaiser Medical Records, Mark Snookal, April 19, 2019, Bates No. Snookal 641 - 643	12
2	Note, dated July 29, 2019, Bates No. Snookal 665	18
3	E-mail between Steven H. Khan and Scott Levy, dated August 23, 2019, Bates No. Snookal 644	20
4	Kaiser Medical Records, Bates No. Snookal 779 - 788	34
5	Kaiser Medical Records, Bates No. Snookal 789 - 806	37
6	E-mail Communication re Rotational Work in Nigeria, Bates No. Snookal 01284	40

1 risk than average. Does that make sense?

2 Q Yes. Thank you, Dr. Khan.

3 Quick question. You write that "has not shown
4 any growth for three years." Is there a reason you
5 selected three years as opposed to four or five or even
6 one year?

02:32

7 A That's just based on the years of CT scans, which
8 are between 2016 and 2019, so I just subtracted those and
9 came up with three.

10 Q In the second or third to last line of the e-mail
11 you write, "In summary, Mr. MS's risk of serious
12 complications related to his thoracic aortic aneurysm is
13 low and likely less than 2 percent per year."

02:33

14 In layman's terms, what does that mean?

15 A Well, again, he's demonstrated that the aneurysm
16 is not growing over a three-year period, and so his risk
17 of it starting to expand suddenly seems very low and less
18 than average because he's demonstrated a less-than-average
19 rate of growth over the last three years we've done CTs on
20 him.

02:33

02:33

21 Q In your experience if someone like Mr. Snookal
22 had -- I guess, not had much growth or no growth at all in
23 his thoracic aortic aneurysm, again, from a medical
24 perspective does that ever change over time?

25 A Yes, it certainly can. So he would need once a

02:34

1 year to come back and have a CT scan done, a CAT scan of
2 his aorta. So we would continue to follow with an annual
3 CAT scan.

4 Q And why is it that individuals like Mr. Snookal,
5 why do they need an annual CAT scan? 02:34

6 A Again, just to check to see if it's getting any
7 bigger.

8 Q What are some of the causes that could cause an
9 aortic -- strike that.

10 What are some of the causes that would increase a 02:34
11 thoracic aortic aneurysm? What causes it to grow, so to
12 speak?

13 A Well, one of the factors would be high blood
14 pressure. If his blood pressure was significantly
15 elevated, then that would be a concern. You want to make 02:35
16 sure his blood pressure is well-controlled.

17 Q Any other causes that you can think of?

18 A I think that would be the main one, yeah.

19 Q All right. Thank you.

20 Dr. Khan, do you have any recollection as to when 02:35
21 the last time you had any interaction was with
22 Mr. Snookal?

23 A I do not, no.

24 MS. KENNEDY: I think I'm just about done. Let
25 me see if I can track down the other document. Let's go 02:35

1 Q During the 35 years of general cardiology
2 practice, as well as the transplant cardiology that you
3 also spent time on, how many people with dilated aortic
4 root did you treat?

5 A I don't know. But the early part of my career at 02:51
6 Cedars, I think for seven-ish years, maybe, I worked in
7 the cardiac surgery intensive care unit, so we had a fair
8 number of people with aortic aneurysms, you know, before
9 and after surgery. We took care of them there.

10 Q Let me ask it in a more answerable way. 02:52

11 Do you know on average how many people you saw
12 per year with a dilated aortic root, if you just had to
13 give me your best estimate?

14 A I mean, I would just be making a random wild
15 guess. I don't know. 02:52

16 Q Do you know if it was less than 10 per year on
17 average, more than 10 per year on average?

18 A I would guess it was probably 15 -- between 10
19 and 20, but again, kind of a random guess there.

20 Q Okay. The patients with dilated aortic root you 02:52
21 saw; correct?

22 A Yeah. Yeah.

23 Q I want to follow up on some of the questions that
24 Ms. Kennedy was asking. So you said that one of the
25 reasons why a thoracic aortic aneurysm would increase in 02:53

1 size is high blood pressure; right?

2 A Yeah. I mean, if it was uncontrolled. So that's
3 why I said you'd have to follow it closely to make sure it
4 was controlled recently.

5 Q How do you control blood pressure? How does that 02:53
6 work?

7 A Yeah. Primarily through medicines, some
8 lifestyle things, low-salt diet, you know. Primarily
9 through medicines.

10 Q Okay. Any other lifestyle things other than 02:54
11 low-salt diet?

12 A Well, they shouldn't do strenuous isometric
13 exertion, like, lifting weights. That could be
14 contraindicated to lift heavy weights. You know, general
15 cardio kind of exercise is okay to keep -- walking on a 02:54
16 treadmill, as I recall. So cardio exercise in general is
17 okay, but isometric kind of exercise generally is frowned
18 on, especially very heavy lifting.

19 Q How heavy is heavy usually, just so I have a
20 sense of, you know, sort of what that means? 02:54

21 A I mean, I don't think there is a number that we
22 think about. I think it's something that would be a
23 strenuous amount to lift, and that's going to be different
24 for different people. You know, for some people that
25 might be 30 pounds. For some it might be 50 pounds. But 02:55

1 it depends on the person.

2 Q Okay. Understood. And in terms of medication
3 used to control high blood pressure, would Mr. Snookal be
4 on one or more of those medications?

5 A Yes. He was on two: amlodipine and losartan. 02:55

6 Q Understood. So no other medications would have
7 been needed to control Mr. Snookal's blood pressure?

8 A His blood pressure looked okay there from what I
9 saw, but, yeah, he's apparently doing well. There were, I
10 think, two medicines that were blacked out so I don't 02:55
11 know, but from what I saw there were two medicines he was
12 on for blood pressure.

13 Q Okay. For a patient such as Mr. Snookal where
14 the recommendation is to get a CT, an echocardiogram once
15 per year, why is it that he only needs to have the testing 02:56
16 done once per year and not more frequently?

17 A It depends on the size of the aneurysm and the
18 rate of growth that you're seeing. So his had been stable
19 over the three years that we had checked him.

20 So once a year was adequate for him, and that's 02:56
21 something he could have done anywhere. And it would be
22 ideal for him to come back to the United States and have
23 it done at the same place, but he could have it done
24 anywhere.

25 Q Okay. I want to quickly direct you back to 02:57

1 that's the question.

2 Q Yeah. I guess, does it make you think that you
3 at least must have known that it was in a rural or remote
4 area of Nigeria?

5 MS. KENNEDY: I'll object to the form of the
6 question.

7 THE WITNESS: I mean, it does look like I
8 understood that this was a rural or remote location.

9 BY MS. FLECHSIG:

10 Q Okay. I wanted to ask, I guess to follow up on
11 that, why was it in your opinion that he could perform a
12 job in a rural or remote area of Nigeria?

13 A Well, a couple of things. One is that his
14 aneurysm appeared stable. Second, his blood pressure
15 appeared under reasonably good control; and third, the
16 follow-up for this kind of disease is very intermittent,
17 very periodic.

18 Once a year come back and have a CT scan done.
19 It's not an elaborate follow-up, and it's not complex or
20 difficult to follow. I mean, it's a very quick, simple
21 visit. You just have him come in. Check the results of
22 the CT, check the blood pressure, chat a little bit, and
23 it's not a complicated disease process.

24 If it was to get bigger, then the follow-up would
25 be more intense, but at the level he's at it's not

02:59

02:59

03:00

03:01

03:01

1 particularly intense. It's a straightforward type of
2 follow-up.

3 Q Yeah. In terms of detecting whether the size has
4 changed, that's the purpose of the CT, the annual CT scan?

5 A Yeah.

03:01

6 Q I wanted to ask you -- you and Ms. Kennedy
7 discussed a little bit a citation that I've highlighted on
8 the screen here. I think it's Annals of Thoracic Surgery,
9 2002, and there's a volume and page number.

10 A Um-hum.

03:02

11 Q You said you recall actually looking that study
12 up in order to, you know, draft this e-mail; is that
13 correct?

14 A Yeah.

15 Q Okay. What did you do to locate that study?

03:02

16 A Typically what I do is do a search on MedMine or
17 PubMed, which is kind of a federal database for searching
18 for medical questions. And then you get a list of papers
19 that are relevant, and then I look through them and find a
20 table that listed thoracic aneurysm size and the risks
21 based on that.

03:02

22 It could also come from the guidelines because --
23 I'm not actually sure if there were guidelines at this
24 point for aortic aneurysm management, but I know there
25 currently are guidelines for follow-up, but this is a

03:03

1 while ago, yeah.

2 Q Okay. Just to sort of put a point on this, you
3 put in this highlighted line here, "In summary, Mr. MS's
4 risk of serious complications related to his thoracic
5 aortic aneurysm is low and likely less than 2 percent per
6 year."

03:03

7 Why did you conclude less than 2 percent or the
8 risk of serious complication was likely less than 2
9 percent per year?

10 A Yeah. Basically, what I mentioned before, that
11 we had been following the aneurysm over the last three
12 years, and the aneurysm had not grown or enlarged at all.
13 The average person, as I mentioned, would grow about 0.1
14 centimeters per year, but the fact that his had not grown
15 meant or implied that the risk of enlarging in any given
16 year was lower than that 0.1 percent, so the risk of a
17 problem with the aneurysm would likely be less than that
18 reported in literature.

03:04

03:04

19 Q Okay. Okay. Thank you for going through that.

20 So do you have any recollection speaking in
21 realtime with anyone from Chevron about Mr. Snookal?

03:04

22 A No, I don't. I don't remember if I spoke to
23 someone.

24 Q Okay. Do you remember whether you would have
25 been willing to speak to someone had you connected in

03:05

1 realtime over the phone or the internet?

2 A Yes, sure.

3 Q Would you have been willing to provide additional
4 follow-up information had they asked for it after this
5 e-mail?

03:05

6 A Yeah. Certainly.

7 MS. FLECHSIG: I'm going to go through an
8 additional exhibit. I'm going to mark as Exhibit 4 what's
9 been produced as Snookal 00779 through Snookal 00788.

10 (The document referenced was marked

03:07

11 as Exhibit 4 for identification and is

12 attached hereto.)

13 MS. KENNEDY: You said 779 through 788?

14 MS. FLECHSIG: 788, yeah, I think that's right.

15 MS. KENNEDY: I'm sorry. 799 through 788?

03:07

16 MS. FLECHSIG: Excuse me, 779.

17 MS. KENNEDY: Okay.

18 MS. FLECHSIG: 779, apologies, through -- yeah,

19 actually, okay. Hold on. I think I found the better

20 redacted version. Let's start with 779 through --

03:07

21 MS. KENNEDY: That's dated April 9, 2019.

22 BY MS. FLECHSIG:

23 Q I think that's the same, but with fewer

24 redactions. I apologize, but I want to show you this, as

25 well, Dr. Khan.

03:08

1 Snookal 01284.

2 (The document referenced was marked
3 as Exhibit 6 for identification and is
4 attached hereto.)

5 BY MS. FLECHSIG:

6 Q And it's just one-page, Dr. Khan. I'm going to
7 give you a second to read through it.

8 A Um-hum. Yes.

9 Q Have you seen this document before?

10 A I'm sure I did. I mean, I responded to it.

03:20

11 Q It looks like these are messages that you
12 exchanged with Mr. Snookal via the Kaiser Permanente
13 communication platform; is that correct?

14 A Right. I mean, Kaiser patients can e-mail their
15 doctor directly and we can respond back directly.

03:20

16 Q Okay. So in this e-mail that Mark Snookal sent
17 you 7-24-2019, does this look like a true and correct copy
18 that you received?

19 A Yeah.

20 Q Okay. In it you'll see he says, "I was a
21 successful candidate for a position working in Nigeria on
22 a 28-day rotational assignment (28 days on in Nigeria and
23 28 days off in the US)."

03:21

24 With this rotational assignment where he's
25 working 28 days in Nigeria and 28 days off in the United

03:21

1 States, the fact that he's working 28 days on at a time,
2 would that impact your analysis of Mr. Snookal's ability
3 to complete the job duties for 28 days at a time?

4 MS. KENNEDY: Objection. Lacks foundation as
5 phrased, but you can respond, Dr. Khan. 03:22

6 THE WITNESS: I don't think that would be
7 contraindicated based on his medical condition.

8 BY MS. FLECHSIG:

9 Q And why not?

10 A I mean, he basically just needs to get a CT once 03:22
11 a year and then have his blood pressure checked, but I
12 mean, his blood pressure is under control. And most
13 people with high blood pressure, you know, they're checked
14 a couple times a year, but, you know, this is well within
15 acceptable parameters for checking somebody's aortic 03:22
16 aneurysm and blood pressure when he's back here roughly
17 once a month.

18 Q Can people also check their blood pressure
19 themselves at home?

20 A Yeah, absolutely. Yeah, we encourage that now. 03:22
21 That's -- we encourage people to get home blood pressure
22 cuffs, and Kaiser hands them out or sells them to patients
23 for the patients to do that too.

24 MS. FLECHSIG: Okay. I think that's all I have
25 for you, Dr. Khan. I think that's it. Thank you so much 03:23

1 CERTIFICATE

2 OF

3 CERTIFIED SHORTHAND REPORTER

4
5 The undersigned Certified Shorthand Reporter
6 of the State of California does hereby certify:

7 That the foregoing proceeding was taken
8 remotely before me at the time and place therein set
9 forth, at which time the witness was duly sworn by me;

10 That the testimony of the witness and all
11 objections made at the time of the examination were
12 recorded stenographically by me and were thereafter
13 transcribed, said transcript being a true and correct
14 copy of my shorthand notes thereof;

15 I hereby certify that I am not interested in
16 the event of the action.

17 IN WITNESS WHEREOF, I have subscribed my name
18 this date: February 17, 2025.

19
20 
21 MARIVON H. CHRISTINE, CSR
22 Certificate No. 3735
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Marivon H. Christine , Certified Shorthand Reporter,
CSR No. 3735, hereby certify:

The foregoing is a true and correct copy of the
original transcript of the proceedings taken by me
as thereon stated.

Dated: February 24, 2025

EXHIBIT 16

UNITED STATES DISTRICT COURT

CENTRAL DISTRICT OF CALIFORNIA - WESTERN DIVISION

MARK SNOOKAL, an individual,)
)
Plaintiff,)
)
v.) NO. 2:23-cv-6302-
) HDV-AJR
CHEVRON USA, INC., a California)
Corporation, and DOES 1 through)
10, inclusive,)
)
Defendants.)
_____)

Videotaped deposition of MARK JORDAN

SNOOKAL, Plaintiff, taken on behalf of Defendants
at 333 South Hope Street, 43rd Floor, Los Angeles,
California, commencing at 10:00 a.m. on Friday,
May 10, 2024, before John M. Taxter, Certified
Shorthand Reporter No. 3579 in and for the State
of California, a Registered Professional Reporter.

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21 VIDEOGRAPHER:

22 GIGI FADICH
23
24
25

1 time whose name escapes me at the moment to 10:25:05
2 basically put me back in analyzer engineering but 10:25:09
3 with a focus on analyzer reliability improvement. 10:25:13
4 So they kind of made that one up. 10:25:19
5 Q They created a position for you because 10:25:23
6 they wanted you in that -- in that department? 10:25:25
7 A Correct. 10:25:27
8 Q And I -- I guess my question had been 10:25:28
9 you -- you said it wasn't a promotion. 10:25:30
10 Was it a lateral move? And was it -- it 10:25:32
11 wasn't a demotion; right? 10:25:34
12 A In my mind, it was a demotion. It was a 10:25:37
13 lateral move from a career development standpoint, 10:25:40
14 I was told. 10:25:48
15 Q And why -- 10:25:48
16 A And I treated it that way, but it didn't 10:25:49
17 really feel like that at the time. 10:25:53
18 Q Why was it a demotion, in your mind? 10:25:54
19 A I went from supervising a group of 18 10:25:57
20 people to supervising no one and essentially doing 10:25:59
21 the same job that I left before I did that 10:26:03
22 supervisory job. 10:26:05
23 Q Were you paid the same? 10:26:09
24 A I was. 10:26:10
25 Q And that -- so that position is in the 10:26:13

1	subgroup.	10:28:03
2	Is that right?	10:28:03
3	A That is correct.	10:28:04
4	Q Then so at this point you had worked in	10:28:06
5	the maintenance department and in the engineering	10:28:08
6	group; is that right?	10:28:12
7	A Yes.	10:28:13
8	Q And you held that IEAR team lead	10:28:16
9	position from November of 2016 to November of	10:28:19
10	2019; is that right?	10:28:22
11	A Yes.	10:28:22
12	Q Okay. And did I already ask you this?	10:28:26
13	You were a PSG 22 in that position?	10:28:28
14	A I was.	10:28:32
15	Q And then I think that was around the	10:28:34
16	time of the Escravos which we'll get into in a	10:28:38
17	moment.	10:28:43
18	Is that right?	10:28:43
19	A Yes, it was.	10:28:43
20	Q Okay. Now, you -- you were based out of	10:28:44
21	Chevron's El Segundo refinery throughout your time	10:28:47
22	with Chevron; correct?	10:28:50
23	A That's correct.	10:28:51
24	Q And your employer was Chevron USA, Inc.;	10:28:53
25	is that right?	10:28:53

1 A They have a very complicated corporate 10:28:59
2 structure, so I don't actually know -- 10:29:01
3 Q Okay. 10:29:01
4 A -- the answer that question. 10:29:04
5 Q As you sit here right now, do you have 10:29:06
6 any reason to dispute that your employer 10:29:07
7 throughout that time was Chevron USA, Inc.? 10:29:10
8 A I do not. 10:29:12
9 Q And how many employees total at the 10:29:14
10 El Segundo refinery, your best estimate? 10:29:15
11 A I would say around a thousand. 10:29:18
12 Q And there were -- so I -- correct me if 10:29:21
13 I'm wrong, but I -- as I understand it, there -- 10:29:26
14 and I think we talked about this a little bit. 10:29:30
15 There are different departments, and in 10:29:33
16 the maintenance department there are four 10:29:34
17 subgroups -- right? -- or at the time there were 10:29:36
18 four subgroups; routine maintenance, reliability, 10:29:38
19 integrity, integrity turnaround, and construction 10:29:43
20 services. 10:29:46
21 Does that sound right? 10:29:47
22 A You'll have to break them up a little 10:29:48
23 bit more. 10:29:50
24 Q Okay. 10:29:50
25 A Not -- not further, just a little more 10:29:50

1 page 3 of the document, SNOOKAL-607, is that your 10:46:02
2 signature at the bottom? 10:46:07
3 A It is. 10:46:08
4 Q And it's dated July 18, 2019; is that 10:46:08
5 right? 10:46:08
6 A That's correct. 10:46:13
7 Q And is this referred to as an MSEA form? 10:46:16
8 A It is. 10:46:19
9 Q And so on -- and so on the first three 10:46:24
10 pages of the form up to your signature, all the 10:46:28
11 boxes that are checked, you checked those; right? 10:46:33
12 A That's correct. 10:46:36
13 Q Okay. And so box No. 1 is: 10:46:36
14 "Do you have any medical, 10:46:40
15 physical or psychological 10:46:41
16 conditions under the care of a 10:46:42
17 health professional? If yes, 10:46:44
18 please describe." 10:46:46
19 You marked by the box "yes"; right? 10:46:48
20 A Correct. 10:46:48
21 Q And then you said: 10:46:50
22 "I have a dilated aortic root. 10:46:51
23 I am under the care of a 10:46:54
24 cardiologist and see him once per 10:46:56
25 year for a checkup. I have 10:46:58

1 consulted with him on this 10:46:59
2 assignment, and he sees no issues 10:47:00
3 with it." 10:47:02
4 You wrote that; correct? 10:47:02
5 A I did. 10:47:03
6 Q And you -- you had -- you had testified 10:47:05
7 about this earlier. I'm sorry for -- for -- I 10:47:09
8 think you were diagnosed with the dilated aortic 10:47:12
9 root in 2015. 10:47:16
10 Is that wrong? 10:47:17
11 A I -- I honestly can't remember if it was 10:47:19
12 late 2014 or 2015. 10:47:21
13 Q Okay. But in that time frame? 10:47:24
14 A In that time frame. 10:47:26
15 Q And who -- who diagnosed you with that? 10:47:27
16 A Dr. Khan who was my doctor through this 10:47:30
17 whole event. 10:47:34
18 Q Is he with Cedars? 10:47:36
19 A He, I think, has multiple affiliations. 10:47:40
20 I saw him at Kaiser Permanente, Los Angeles. 10:47:44
21 Q And, I mean, I -- I just want to ask a 10:47:49
22 couple background questions about it. I don't 10:47:54
23 want to get too far into your -- your medical 10:47:55
24 history. 10:48:00
25 What -- when -- when he diagnosed you 10:48:00

1 with it, what was the prognosis? 10:48:02

2 A To sum it up, he said that sometimes the 10:48:09

3 aortic root will not expand any more than it 10:48:15

4 already has and it will never expand to a point 10:48:18

5 where they consider it to be something that they 10:48:23

6 should operate on, or it can expand at a rate and 10:48:26

7 to a size that they consider to be operable or 10:48:36

8 something that they should operate on. He said 10:48:40

9 that there's no way to accurately predict -- 10:48:44

10 predict which one mine would be but that the rate 10:48:51

11 of growth determines how they treat it, basically. 10:48:54

12 Q Okay. And -- and I think here you say 10:49:04

13 that you had to see him on a yearly basis. Was 10:49:08

14 that what he -- what he -- 10:49:11

15 A They call it -- 10:49:13

16 Q -- said at the time? 10:49:14

17 A Yes. They call it "watchful waiting" 10:49:16

18 which is basically taking a picture of it once a 10:49:19

19 year and seeing if it's grown or not and at what 10:49:22

20 rate from the last time. 10:49:25

21 Q And so you -- you followed up on a 10:49:26

22 yearly basis with him, I'm assuming? 10:49:28

23 A Every year. 10:49:30

24 Q And how did it develop, if at all? 10:49:31

25 A There were some years where it grew at a 10:49:36

1 low rate and other years where it had remained 10:49:40
2 stable. I believe at the time that I applied it 10:49:44
3 had been stable for two or three years. 10:49:47

4 Q And you may have already said this, but 10:49:53
5 the cardiologist that you're referring to here on 10:49:56
6 page 1 of -- of this exhibit, Exhibit 3, is 10:49:58
7 Dr. Khan; right? 10:50:02

8 A Yes. That's correct. 10:50:03

9 Q What's the current state of the 10:50:08
10 condition? 10:50:10

11 A I'm not sure how to answer that 10:50:13
12 question. 10:50:15

13 Q Have you continued to see Dr. Khan about 10:50:17
14 the dilated aortic root? 10:50:19

15 A Dr. Khan retired. He retired during 10:50:22
16 COVID. Kaiser had trouble assigning me a new 10:50:25
17 doctor, and during that time I left Chevron. 10:50:30
18 After this I went to Portland, and I continued my 10:50:37
19 care in Portland. 10:50:43

20 Q Okay. With a different cardiologist, I 10:50:44
21 assume? 10:50:47

22 A With a different -- yeah. 10:50:47

23 Q And what is his or her name? 10:50:48

24 A I've actually -- the first two years I 10:50:49
25 was in Portland they did not assign me a 10:50:53

1 cardiologist. They just managed it through my 10:50:55
2 primary-care physician. I recently changed 10:50:58
3 employment to a different employer, and I do have 10:51:02
4 a cardiologist now, a Dr. Schneider. I've only 10:51:05
5 seen him once. 10:51:10

6 Q Okay. And we'll get into this more 10:51:11
7 later, but I believe you moved to Washington? 10:51:13

8 A Correct. 10:51:14

9 Q And so Dr. Schneider is in Washington? 10:51:15

10 A He's actually in Portland. I live right 10:51:17
11 near Portland, Oregon. 10:51:21

12 Q Oh, I see. 10:51:21

13 A There's a heart center in Portland, 10:51:22
14 Oregon. 10:51:26

15 Q And when was your most recent checkup 10:51:26
16 with Dr. Schneider? 10:51:28

17 A It was actually unrelated to the aortic 10:51:31
18 root dilation and was in -- I don't remember the 10:51:36
19 exact month, but it was late 2023. 10:51:43

20 Q And what was it related to? 10:51:46

21 A Tangentially related to PVCs that I also 10:51:50
22 listed on the form. They ablated those to end -- 10:51:56
23 end me having PVCs. 10:51:59

24 Q What are PVCs? 10:52:01

25 A Premature ventricular contractions. 10:52:03

1 BY MR. MUSSIG:

10:59:00

2 Q Well, I -- you know, let me -- let me
3 rephrase it.

10:59:03

10:59:04

4 The document speaks for itself, but did
5 Dr. -- did Dr. Sobel tell you at any point that
6 getting the recommendation letter would guarantee
7 medical clearance?

10:59:05

10:59:08

10:59:10

10:59:12

8 A What Dr. Sobel said when he gave this to
9 me was -- he said, "You'll just need a letter from
10 your cardiologist. This is what it should say,
11 and then it should be fine."

10:59:14

10:59:16

10:59:19

10:59:22

12 Q Okay. Did he say anything about needing
13 further assessment?

10:59:27

10:59:33

14 A He did not.

10:59:35

15 Q Since this visit, have you ever seen
16 Dr. Sobel again?

10:59:40

10:59:42

17 A No. He's not my doctor, so --

10:59:42

18 Q I understand. It was just this one
19 time?

10:59:47

10:59:49

20 A Yeah.

10:59:51

21 MR. MUSSIG: I'll mark as Exhibit 4.

10:59:55

22 It's a letter from Dr. Khan on Kaiser Permanente
23 letterhead. It's Bates-numbered SNOOKAL-665.

11:00:00

11:00:05

24 (Exhibit 4 was marked for identification
25 by the Certified Shorthand Reporter.)

11:00:05

11:00:18

1	A This e-mail was sent after I requested	11:48:12
2	this e-mail, so there was no response necessary.	11:48:14

3	Q	How did you request the e-mail?	11:48:18
---	---	---------------------------------	----------

4	A Through Andrew Powers which was the HR	11:48:20
5	manager at El Segundo.	11:48:23

6	Q	And why did you request the e-mail?	11:48:25
---	---	-------------------------------------	----------

7	A	Because I wanted them to give me written	11:48:28
8		documentation of why they were saying that I	11:48:29
9		couldn't go to Escravos and to identify other	11:48:32
10		locations where they would consider me to be	11:48:35
11		medically fit.	11:48:38

12	Q Oh. And he does that in this e-mail --	11:48:40
13	right? -- at the -- at the bottom?	11:48:42

14	A Correct.	11:48:43
----	------------	----------

15	Q Did you ever apply to any jobs in those	11:48:44
16	locations?	11:48:47

17	A	There were no job openings in those	11:48:48
18		locations.	11:48:49

19	Q I see. And I -- I guess most -- are	11:48:49
20	these locations -- well, I -- I don't know if	11:49:04
21	you -- you probably don't know, but I'll ask the	11:49:10
22	question. You can say "I don't know."	11:49:13

23	Would they have adequate medical	11:49:14
24	facilities in all these locations where he	11:49:15
25	indicates he would not foresee any issues with you	11:49:17

1 of discrimination to anyone else at Chevron? 11:55:59

2 A No. 11:56:02

3 Q And when you say "based on a lack of 11:56:03

4 understanding," what -- what do you mean by that? 11:56:13

5 A In my opinion, I don't believe that the 11:56:18

6 people that evaluated me did their due diligence 11:56:21

7 in understanding the condition that I had and the 11:56:24

8 effects that a remote location would have. That's 11:56:28

9 what I meant by that. 11:56:30

10 Q Okay. And why do you believe that? 11:56:31

11 A Just based on the conversations that I 11:56:35

12 had with them, it was clear that they didn't 11:56:36

13 really know what they were looking at and the fact 11:56:38

14 that they took a 17-year-old study as the only 11:56:41

15 piece of evidence that they looked at, as far as I 11:56:47

16 knew. 11:56:50

17 Q Wasn't the 17-year-old study referenced 11:56:53

18 by Dr. Khan? 11:56:55

19 A It's not Dr. Khan's job to give them the 11:56:57

20 information that they need. They didn't -- 11:57:01

21 Q So you agree that they were -- they 11:57:05

22 based their decision on the information provided 11:57:07

23 by Dr. Khan; right? 11:57:09

24 MS. LEAL: Objection. Calls for 11:57:10

25 speculation. 11:57:11

1 dated September 5th, 2019 -- well, an e-mail from 12:12:12
2 Mr. Snookal but to Austin Ruppert and then from 12:12:15
3 Mr. Ruppert to Troy Tortorich, Thalia Tse, and 12:12:19
4 Andrew Powers. 12:12:24

5 (Exhibit 10 was marked for 12:12:24
6 identification by the Certified 12:12:24
7 Shorthand Reporter.) 12:12:24

8 BY MR. MUSSIG: 12:12:24

9 Q Do recognize the first e-mail in this 12:12:45
10 chain, the one at the bottom of the page? 12:12:47

11 A Yes. 12:12:47

12 Q Okay. And this is an e-mail from you to 12:12:53
13 Mr. Ruppert; correct? 12:12:55

14 A Correct. 12:12:56

15 Q And Mr. Ruppert at this point was your 12:12:57
16 supervisor; right? 12:12:59

17 A Correct. 12:13:00

18 Q And it says "position" -- the "subject" 12:13:01
19 line is "positions in 2H PDC." 12:13:03

20 What does -- what does the "2H PDC" 12:13:06
21 mean? 12:13:09

22 A A second half PDC. I don't know what 12:13:10
23 the acronym stands for. It's just what they used 12:13:14
24 for the job selection process at Chevron. 12:13:17

25 Q Okay. And so why -- they look -- you're 12:13:24

1 e-mailing Mr. Ruppert three possible positions. 12:13:30

2 Why were you doing that? 12:13:33

3 A They asked me to search and see which 12:13:34

4 positions in El Segundo I felt that I would be 12:13:36

5 qualified for. 12:13:40

6 Q And is that because this was after the 12:13:41

7 Escravos -- the REM position in Escravos had been 12:13:45

8 rescinded and your IEAR team lead position had 12:13:50

9 been back-filled? 12:13:55

10 A That's correct. 12:13:56

11 Q And I'm going to ask you a few 12:13:57

12 questions. You may or may not know the answer, 12:14:07

13 but I just want to see if you do. 12:14:10

14 Any -- any job postings in the PDC 12:14:12

15 require a specific application process; right? 12:14:16

16 A They do. 12:14:19

17 Q Okay. And each of those jobs has a -- a 12:14:20

18 PDR, a personal development representative, 12:14:23

19 assigned to the job? 12:14:25

20 A That's correct. 12:14:26

21 Q Okay. And a PDR can represent 15 to 20 12:14:27

22 jobs in the process; right? 12:14:31

23 A I don't know the numbers, but -- 12:14:34

24 Q More than one? 12:14:36

25 A -- more than one. 12:14:36

1 Q And each of those jobs also has a job 12:14:38
2 owner; is that right? 12:14:41
3 A That's my understanding. Yes. 12:14:43
4 Q Okay. And the job owner is typically 12:14:45
5 the hiring supervisor for the opening; is that 12:14:47
6 right? 12:14:47
7 A I don't know if it's typically the -- I 12:14:50
8 don't know if it works that way. 12:14:52
9 Q Okay. You just don't have any knowledge 12:14:53
10 one way or the other? 12:14:56
11 A I don't. 12:14:58
12 Q Do you know if the job owner is also 12:14:58
13 typically the supervisor who the employee would 12:15:02
14 report to, if they get that job? 12:15:04
15 A I -- I do not know the answer to that. 12:15:06
16 No. 12:15:08
17 Q Okay. Do you have any knowledge about 12:15:09
18 the job owner's role in the decision-making 12:15:14
19 process as to -- as to the particular job? 12:15:16
20 A Not in a generic sense. Generally, each 12:15:20
21 job is defined -- they'll tell you who to talk to. 12:15:22
22 It's not, in my experience, always the same 12:15:27
23 person. 12:15:31
24 Q What do you mean, "it's not"? 12:15:31
25 A The -- the -- the owner of the position 12:15:32

1	is not always the person that will be your	12:15:35
2	supervisor --	12:15:38
3	Q I see.	12:15:39
4	A -- in my experience. That doesn't mean	12:15:39
5	I know the process.	12:15:43
6	Q Sure. In your experience, is it usually	12:15:44
7	the supervisor?	12:15:47
8	A No.	12:15:47
9	Q So more often than not the job owner is	12:15:54
10	not the same as the person that would be	12:15:56
11	supervising the position, in your experience?	12:15:58
12	A In my recollection and experience, that	12:16:01
13	is correct.	12:16:03
14	Q In -- in your recollection and	12:16:05
15	experience, do you know then like how a job owner	12:16:06
16	would be selected or assigned?	12:16:10
17	A I do not.	12:16:18
18	Q Earlier you had said -- going back to	12:16:25
19	the exhibit, Exhibit 10, you had said they told	12:16:27
20	you to look through the PDC openings.	12:16:30
21	When you said "they" -- is that right?	12:16:34
22	A Yes.	12:16:36
23	Q Okay. When you said "they," who do	12:16:37
24	you -- who were you referring to?	12:16:39
25	A We had a meeting between Austin	12:16:41

1	"Powers," Thalia Tse, and --	12:16:44
2	Q Austin Ruppert?	12:16:49
3	A Sorry. Yes. Austin Ruppert, Andrew	12:16:50
4	Powers, and Thalia Tse. I believe that was on the	12:16:53
5	6th or 7th of September.	12:17:04
6	Q Well, this e-mail is dated	12:17:04
7	September 5th --	12:17:07
8	A Okay.	12:17:07
9	Q -- so it couldn't have been the 6th or	12:17:09
10	7th.	12:17:11
11	A So it might have been the 4th then.	12:17:11
12	Q Okay. Sometime shortly before you sent	12:17:13
13	this?	12:17:15
14	A I don't remember the exact date, but,	12:17:15
15	yeah, it must be September 5th. It would be the	12:17:17
16	same day that we had the meeting.	12:17:19
17	Q So you had the meeting, and then you	12:17:24
18	immediately went to look for positions; right?	12:17:29
19	A Right. So there is a time limit; right?	12:17:31
20	The PDCs happen on a cycle -- that's why	12:17:35
21	it's called "2H" -- and there's deadlines. I	12:17:39
22	believe we were -- I believe the deadline was	12:17:43
23	Friday, so --	12:17:45
24	Q And this was on Thursday?	12:17:49
25	A Yeah, if I recall correctly.	12:17:50

1 Q Now, at -- at one point in this case 12:18:07
2 there is an allegation that during this meeting 12:18:08
3 they identified three positions that you were 12:18:10
4 qualified for; operating assistant, general team 12:18:13
5 lead, and maintenance change operating assistant. 12:18:16
6 Are those the same as these positions 12:18:18
7 that are in this e-mail? 12:18:25
8 A Two are the same; one is not. 12:18:25
9 Q Okay. And so -- so let me -- is that 12:18:28
10 accurate, that allegation that you -- they 12:18:31
11 identified three positions they thought you were 12:18:34
12 qualified for? 12:18:36
13 A Yes. 12:18:37
14 Q Okay. 12:18:37
15 A That would be after this e-mail. So 12:18:37
16 Austin came and talked to me with three positions. 12:18:40
17 Q Oh. Oh, okay. So this e-mail came 12:18:44
18 after a meeting with Austin, not a meeting -- 12:18:50
19 A No. This -- so in the time line we met 12:18:52
20 to discuss the path forward with Austin, Thalia, 12:19:00
21 and Andrew. During that meeting, they said they 12:19:07
22 would look for positions, and they also asked me 12:19:12
23 to look for positions. So we both looked for 12:19:14
24 positions. 12:19:17
25 I sent them this e-mail with the 12:19:18

1 positions that I found. I don't know how they 12:19:20
2 came up with their positions that they approached 12:19:26
3 me with afterwards, but the positions that Austin 12:19:29
4 came and talked to me about were the second ones 12:19:34
5 on this e-mail, the two that start with "DS&C" -- 12:19:39
6 Q Okay? 12:19:45
7 A -- which are positions in El Segundo. 12:19:45
8 And he came to me with a third position also in 12:19:47
9 El Segundo that isn't on this e-mail but is the 12:19:51
10 maintenance change OA. 12:19:55
11 Q Maintenance change "AOA"? 12:19:58
12 A Maintenance change OA. 12:20:00
13 Q Maintenance change? 12:20:03
14 A Yeah. 12:20:04
15 Q And why isn't that position on this 12:20:06
16 e-mail? 12:20:09
17 A I didn't particularly want that 12:20:11
18 position, so I didn't identify it. 12:20:13
19 Q Why didn't you want that position? 12:20:18
20 A It was a new position that had been 12:20:25
21 created that year, and I didn't see it having much 12:20:27
22 potential for career development and I saw it as a 12:20:33
23 possible step back in my career based on its job 12:20:45
24 description that I saw. 12:20:49
25 Q What in the job description made you 12:20:49

1 think that? 12:20:53

2 A No direct reports, a purely influential 12:20:53

3 leadership position which can be a career 12:20:58

4 development position, but not if it doesn't have 12:21:01

5 an established pathway already. 12:21:04

6 Q And you said that position was created 12:21:06

7 earlier in the year? 12:21:09

8 A I -- I believe it was created for this 12:21:10

9 PDC. I don't think it existed before this PDC. 12:21:13

10 Q So -- so nobody had held that position 12:21:17

11 previously; right? 12:21:21

12 A It had existed once before, but it had a 12:21:22

13 different reporting structure which would have 12:21:25

14 been beneficial to your career. It reported 12:21:28

15 directly to the maintenance manager. And the new 12:21:31

16 position the second time they did it reported to a 12:21:35

17 different manager -- 12:21:38

18 Q And how long -- 12:21:39

19 A -- lower in the structure. 12:21:40

20 Q How long prior to this was that first 12:21:42

21 iteration of the position? 12:21:46

22 A You mean, when did it exist or when -- 12:21:51

23 Q Yes. 12:21:53

24 A It, I believe, was two years earlier, 12:21:54

25 and it was only held by one person, I believe, and 12:21:56

1	then discontinued --	12:22:00
2	Q Okay.	12:22:01
3	A -- which also led into why I didn't want	12:22:05
4	it.	12:22:07
5	Q Okay. So looking at Exhibit 10, you	12:22:08
6	identify three positions. The first one you're --	12:22:12
7	you're telling Austin that, according to	12:22:15
8	Dr. Levy -- I'm assuming you're saying in the	12:22:18
9	e-mail that we had looked at earlier --	12:22:21
10	A Uh-huh.	12:22:23
11	Q -- you would not be -- you would not	12:22:24
12	qualify for that position?	12:22:25
13	A Correct.	12:22:26
14	Q Okay. And then the third one on your	12:22:27
15	list, it says a degree is "required for OA	12:22:28
16	positions, and I do not have a degree."	12:22:33
17	So did you think you were qualified for	12:22:35
18	that position?	12:22:36
19	A Yes, I do think I'm qualified for that	12:22:37
20	position.	12:22:42
21	Q Isn't a qualification -- and by "degree"	12:22:43
22	I assume you mean a college degree?	12:22:45
23	A College degree, correct.	12:22:47
24	Q And if it says a college degree is	12:22:48
25	required but you don't have one, how would you be	12:22:51

1 qualified? 12:22:53

2 A The operating assistant role is posted 12:22:54

3 many times each year, and it's for the same job 12:22:57

4 responsibilities and duties. And sometimes it has 12:23:03

5 a degree requirement, and sometimes it does not 12:23:07

6 have a degree requirement. Austin said that I 12:23:09

7 should go talk to Tolly Graves who was the 12:23:12

8 operations manager and the owner of that position 12:23:16

9 and ask him if I could apply, and he did give me 12:23:19

10 permission to apply without a college degree. 12:23:21

11 Q Do you think your lack of college degree 12:23:24

12 held you back at Chevron? 12:23:26

13 A Yes. 12:23:26

14 Q Do you agree that's not discriminatory? 12:23:32

15 A Yes. 12:23:34

16 Q So going back, I -- I -- I don't think 12:23:41

17 we finished with the time line. 12:23:43

18 So there was a meeting with you, Thalia, 12:23:46

19 Austin, and Andrew, and you said you left the 12:23:50

20 meeting saying, "Let's go see if there are other 12:23:54

21 jobs"; right? 12:23:57

22 A Uh-huh. 12:23:57

23 Q And so you went and you saw these three, 12:23:58

24 you sent them to Austin, and then I -- and I think 12:24:00

25 that's where we left off. 12:24:06

1	Q	Okay. Now, some of these jobs, looking	12:26:30
2		at the PSG which we talked about earlier, there --	12:26:33
3		there -- they range from PSG 21 to PSG 24; right?	12:26:36
4	A	Yes.	12:26:40
5	Q	And you were a PSG 22 at the time?	12:26:40
6	A	I was.	12:26:43
7	Q	Okay. And so were you looking for a PSG	12:26:44
8		22 position or a PSG 23 position?	12:26:49
9	A	I was looking at a position comparable	12:26:52
10		to the EGTL position which is a 23, 24 position.	12:26:55
11	Q	When you say "EGTL," that's the REM	12:27:00
12		position in Escravos?	12:27:04
13	A	Yes.	12:27:05
14	Q	Was a 23, 24 PSG?	12:27:05
15	A	It was.	12:27:08
16	Q	And how much would your pay have	12:27:08
17		increased going from PSG 22 to PSG 23?	12:27:12
18	A	Those aren't really published	12:27:19
19		information, so it would just be an estimate.	12:27:21
20	Q	What's your estimate?	12:27:24
21	A	Somewhere in the neighborhood of 12,000	12:27:26
22		"dollars" a year -- I'm sorry -- 12 percent a	12:27:28
23		year.	12:27:33
24	Q	And so how much were you making in the	12:27:35
25		22 position, PSG 22?	12:27:38

1	A	I think it was 147,000.	12:27:41
2	Q	Okay. So about another -- what? --	12:27:44
3		sixteen, seventeen thousand a year?	12:27:47
4	A	Roughly, plus there's an increase in	12:27:49
5		your bonus, your annual bonus, as well.	12:27:52
6	Q	And what is that increase?	12:27:54
7	A	Between 22 and 23 I think it goes from	12:27:56
8		14 to 16 percent, and 24 I believe is 18 percent.	12:28:00
9	Q	And how -- what would that translate to	12:28:06
10		in terms of dollars, again, estimates?	12:28:08
11	A	Two percent of my base pay. So what is	12:28:11
12		that?	12:28:14
13		Like 5,000, \$6,000 each grade.	12:28:15
14	Q	Okay. So what jobs did you ultimately	12:28:20
15		apply to in this September, October, November time	12:28:26
16		frame, 2019?	12:28:32
17	A	I applied to the maintenance general	12:28:33
18		team lead, the operating assistant, and the	12:28:35
19		maintenance change OA.	12:28:39
20	Q	Okay. Including -- so one of -- and	12:28:41
21		that's the OA -- the -- one of those OA positions	12:28:49
22		stated that it had a college degree requirement;	12:28:54
23		right?	12:28:54
24	A	Yes.	12:28:58
25	Q	Do you know -- and maybe you don't --	12:28:58

1 whether anyone -- when -- when a job has been 12:29:03
2 posted saying there's a college degree 12:29:08
3 requirement, somebody without a college degree has 12:29:10
4 ever gotten a job at El Segundo? 12:29:14
5 A I believe the answer is "yes," but I -- 12:29:16
6 yes. 12:29:18
7 Q And who do you know that did that? 12:29:19
8 A I believe Larry Laye applied for a job 12:29:23
9 as an OA when it required a college degree. 12:29:26
10 Q How do you spell his last name? 12:29:31
11 A L-a-y-e. 12:29:33
12 Q So you believe Larry Laye got an OA job 12:29:37
13 that had been posted as a -- as requiring a 12:29:40
14 college degree, even though he didn't have a 12:29:43
15 college degree? 12:29:45
16 A I believe so. 12:29:46
17 Q Anyone else? 12:29:47
18 A No. But lots of OAs have no college 12:29:48
19 degree and are OAs. And the OA position, like I 12:29:52
20 said, sometimes it's posted with a college degree, 12:29:56
21 sometimes posted without a college degree, and 12:30:00
22 people hold the same positions in the facility 12:30:02
23 with and without college degrees. 12:30:06
24 Q Well, you got the maintenance change OA 12:30:08
25 position; right? 12:30:10

1	A	I did not.	12:30:11
2	Q	Wait. What was the position? Oh. Hold	12:30:12
3		on. Hold on. Well, let me back up. Let's get	12:30:15
4		there.	12:30:17
5		Any other jobs that you applied to	12:30:19
6		between September and November, 2019?	12:30:21
7	A	Not that I recall.	12:30:23
8	MR. MUSSIG:	I don't know if you guys	12:30:38
9		want to do lunch.	12:30:39
10	MS. LEAL:	Well, we will need lunch.	12:30:40
11	MR. MUSSIG:	I -- this is probably as	12:30:42
12		good a time as any. Why don't we take a break.	12:30:44
13	THE VIDEOGRAPHER:	Video deposition off	12:30:46
14		the record at 12:30 p.m., conclusion of media 2.	12:30:48
15		(Lunch recess: 12:30 p.m.)	12:30:52
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			

1	Los Angeles, California	12:30:52
2	Friday, May 10, 2024	12:30:52
3	1:34 p.m.	12:30:52
4		12:30:52
5	THE VIDEOGRAPHER: Video deposition	13:34:40
6	returning to the record at 1:34 p.m., beginning of	13:34:41
7	media 3.	13:34:45
8		13:34:45
9	FURTHER EXAMINATION	13:34:45
10	BY MR. MUSSIG:	13:34:45
11	Q One question I wanted to circle back on,	13:34:49
12	then we'll move on to -- to these documents.	13:34:51
13	Would you agree the decision to rescind	13:34:54
14	the REM job offer in Escravos was not based on	13:34:56
15	your ability or inability to do the job?	13:35:04
16	A Yeah. It didn't have anything to do	13:35:11
17	with my ability to do the job.	13:35:14
18	MR. MUSSIG: So let me mark as	13:35:16
19	Exhibit 11 a document that's titled "Job title:	13:35:18
20	Maintenance change operating assistant (OA),"	13:35:24
21	SNOOKAL-1131 to -1132.	13:35:27
22	(Exhibit 11 was marked for	13:35:27
23	identification by the Certified	13:35:27
24	Shorthand Reporter.)	13:35:27
25	BY MR. MUSSIG:	13:35:27

1 Q Now, I -- I assume you're familiar with 13:35:48
2 this document? 13:35:51
3 A Uh-huh. 13:35:51
4 Q You have to say "yes" or "no." 13:35:52
5 A Yes. I'm sorry. 13:35:54
6 Q So this is a -- a copy of the El Segundo 13:35:56
7 maintenance change operating assistant, OA, job 13:36:00
8 posting in the PDC database as of the time you 13:36:03
9 were searching for a job in or around September, 13:36:07
10 2019; right? 13:36:12
11 A Yes. 13:36:13
12 Q One question just sort of logistical: 13:36:13
13 So this says -- at the top it's -- it says: 13:36:18
14 "Chevron is accepting online 13:36:24
15 applications for the position of 13:36:26
16 maintenance change operating 13:36:27
17 assistant (OA) located in 13:36:28
18 El Segundo, California through 13:36:31
19 8/11/19." 13:36:34
20 Do you know -- I mean, you weren't 13:36:36
21 looking for a position as of 8/11/19. 13:36:38
22 Was -- was the job extended? Was this 13:36:41
23 deadline extended? 13:36:44
24 A It may have been. I'm not sure. 13:36:46
25 Q Okay. You don't recall? 13:36:47

1 position? 13:38:53

2 A I do not know that this position had a 13:38:54

3 PDR. 13:38:57

4 Q Do you know whether Mr. Cswaykus had any 13:39:07

5 knowledge regarding your heart condition? 13:39:14

6 A I would doubt it, but I don't know. 13:39:19

7 Q Do you know whether he knew your age? 13:39:23

8 A He did. I've worked with Cotey before. 13:39:25

9 Q Okay. And how did -- how would he know 13:39:27

10 your age? 13:39:30

11 A I mean, you can make an estimation. I 13:39:31

12 mean, I don't think he knew my age exactly, but 13:39:34

13 you can make an estimate of someone's age based on 13:39:36

14 appearance. 13:39:39

15 Q I see. So -- so you knew him, so you 13:39:40

16 assumed he had some estimate of how old you were? 13:39:43

17 A Correct. 13:39:45

18 Q On page 2 of this -- of this Exhibit 11 13:39:45

19 it has some "required qualifications" and some 13:40:03

20 "preferred qualifications." 13:40:07

21 Do you see that? 13:40:08

22 A I do. 13:40:09

23 Q And did you meet all the required 13:40:09

24 qualifications at the time you applied? 13:40:12

25 A Yes. 13:40:12

1 Q And did you meet all of the preferred 13:40:29
2 qualifications? 13:40:31
3 A No. 13:40:31
4 Q And I assume one of them was you didn't 13:40:37
5 have a Bachelor's degree; right? 13:40:40
6 A Correct. 13:40:42
7 Q Were there any other preferred 13:40:42
8 qualifications that you didn't meet? 13:40:44
9 And, again, this is at the time you 13:40:46
10 applied for the job. 13:40:48
11 A Uh-huh. For this particular job I would 13:40:48
12 say that it did not align with my career 13:41:00
13 development plan which is one of the preferred 13:41:03
14 qualifications. 13:41:08
15 Q I see. Any others? 13:41:08
16 A No. 13:41:08
17 Q Do you know who ultimately got this job? 13:41:12
18 A I can't remember their name. I -- I -- 13:41:21
19 I know loosely who they are, but I don't really 13:41:23
20 know them. 13:41:26
21 Q Okay. Do you think that you didn't get 13:41:26
22 this job for any sort of discriminatory reason? 13:41:28
23 A No. 13:41:31
24 MR. MUSSIG: Let's mark as Exhibit 12 a 13:41:44
25 document titled "Job title: DS&C - MFG - 13:41:48

1 various different positions; right? 13:44:03

2 So he's in operations, and I was in 13:44:06

3 engineering and maintenance. He was in his 13:44:08

4 various roles someone that I would work with on a 13:44:11

5 regular basis. 13:44:13

6 Q Do you -- do you know whether Mr. Byrd 13:44:20

7 would have any reason to have knowledge about your 13:44:22

8 heart condition? 13:44:26

9 A No. 13:44:26

10 Q You don't know or, "no," he would not? 13:44:29

11 A No, he would not. Sorry. 13:44:31

12 Q And, again, would he know your age, 13:44:33

13 other than just making a general estimate based 13:44:37

14 on, you know, the fact that he knew you? 13:44:39

15 A No, I wouldn't think so, other than 13:44:41

16 that. 13:44:44

17 Q Well, I mean, let me ask this: Did you 13:44:50

18 get this job? 13:44:52

19 A I did not. 13:44:53

20 Q And do you believe that decision was 13:44:53

21 discriminatory in any way? 13:44:55

22 A I believe it might have been, yes. 13:44:59

23 Q Okay. So let me ask a few more 13:45:01

24 questions. 13:45:04

25 Do you know who the decision maker was 13:45:06

1 them is a BS degree in engineering; right? 13:46:18

2 A Correct. 13:46:20

3 Q And you have didn't have a BS degree in 13:46:21

4 engineering; correct? 13:46:23

5 A That is correct. 13:46:24

6 Q And so now we -- we had talked earlier 13:46:26

7 about the fact that certain OA positions, 13:46:33

8 sometimes, when they were posted, they had a 13:46:37

9 college degree requirement; sometimes they didn't. 13:46:39

10 But if one of the required 13:46:45

11 qualifications is a BS degree in engineering and 13:46:47

12 you don't have that, why would you think you're 13:46:50

13 qualified for this job? 13:46:53

14 A I was told that it was a job that I 13:46:54

15 could apply for, if I got permission to apply for 13:46:57

16 it from Tolly Graves who was the operations 13:47:00

17 manager and would have been Zak Byrd's supervisor 13:47:07

18 or manager at that time. 13:47:16

19 Q Do you know who ultimately got this job? 13:47:16

20 A There's two jobs, and I remember the 13:47:19

21 name of one of them. I don't remember the name of 13:47:23

22 the other. One was Danielle Rivera. I don't 13:47:25

23 remember the name of the other. 13:47:36

24 Q Do you know whether Danielle Rivera had 13:47:38

25 a college degree? 13:47:42

1 these PMP ratings?

14:25:12

2 A It is one of the factors.

14:25:14

3 Q And do you know whether your PMP rating
4 was higher or lower than Brian Getchius' was?

14:25:15

14:25:18

5 A I believe it was lower for two of the
6 years.

14:25:21

14:25:23

7 Q And so you believe you were more
8 qualified than Brian Getchius for this position;
9 is that right?

14:25:32

14:25:40

14:25:40

10 A That is correct.

14:25:44

11 Q And why is that?

14:25:45

12 A Brian Getchius at this point had only
13 had supervisory experience of hourly or
14 represented employees. This GTL position is --
15 your direct reports are salaried employees, and
16 then they have hourly reports to them. So it's an
17 indirect report relationship. I had had both
18 union employee representation -- or represented
19 employee supervision as well as at this point I
20 had had salaried representation -- salaried
21 employees' direct reports.

14:25:50

14:25:52

14:25:55

14:26:02

14:26:05

14:26:09

14:26:15

14:26:19

14:26:25

14:26:28

22 Q Okay. Any other reason you think you
23 were more qualified?

14:26:31

14:26:33

24 A I had a reliability background and a
25 better understanding of operations and maintenance

14:26:35

14:26:37

1 coordination and what jobs were important, what 14:26:41
2 jobs weren't important. I had a project 14:26:45
3 management background through other jobs before 14:26:48
4 Chevron. I had done more influential leadership 14:26:54
5 positions which is also necessary in GTL because 14:26:59
6 you're working with other departments and other 14:27:03
7 groups. I just had more general experience that 14:27:05
8 aligned with the selection criteria. 14:27:11

9 Q Anything else? 14:27:15

10 A No. 14:27:15

11 Q What -- so, ultimately, Chevron created 14:27:27
12 a role for you; right? 14:27:30

13 A Yes. 14:27:33

14 Q And it was the reliability change 14:27:33
15 operating assistant; correct? 14:27:36

16 A Yes. 14:27:38

17 Q Okay. And so that's an OA role; right? 14:27:38

18 A No. 14:27:41

19 Q Why not? 14:27:42

20 A All of the OA roles are in operations, 14:27:46
21 except for the two change OA positions which were 14:27:48
22 both in maintenance and were both discontinued 14:27:52
23 during the reorganization. They also only existed 14:27:54
24 for one year. OA positions has been around in the 14:27:57
25 organization by one title or another as far back 14:28:02

1 as anyone really that still works there can 14:28:09
2 remember. It's an integral position in the 14:28:13
3 day-to-day operation of the facility. So the job 14:28:18
4 duties and responsibilities are -- are very 14:28:22
5 dissimilar between an OA and a reliability change 14:28:24
6 OA or a maintenance change OA. 14:28:28

7 Q And so you felt -- well, did you feel 14:28:35
8 that this was a downgrade from your IEAR team lead 14:28:39
9 position? 14:28:52

10 A I did feel that way, yes. 14:28:52

11 Q But you were ultimately put back into 14:28:55
12 the IEAR team lead position; right? 14:28:58

13 A I was, against my wishes. But, yes, I 14:29:01
14 was. 14:29:07

15 Q Okay. Well, we'll get to that. The -- 14:29:07
16 the reliability change operating assistant role 14:29:09
17 was created at the suggestion of your supervisor, 14:29:12
18 Austin Ruppert; right? 14:29:16

19 A Yes. 14:29:16

20 Q Okay. And so would you agree that 14:29:18
21 Mr. Ruppert had a good opinion of your abilities? 14:29:20

22 A Yes. 14:29:20

23 Q And he endorsed you for the REM job in 14:29:22
24 Escravos; right? 14:29:26

25 A No. 14:29:27

1 change OA, maintenance change OA were different 14:33:53
2 from all the other OA roles -- roles at the 14:33:57
3 facility; right? 14:33:59
4 A Yes. 14:34:00
5 Q And how so? As a -- as a reliability 14:34:00
6 change OA, weren't you also in a leadership role? 14:34:03
7 A No. 14:34:03
8 Q Were you guiding teams? 14:34:12
9 A No. 14:34:12
10 Q But the other OA positions did? 14:34:17
11 A The operating assistants have day-to-day 14:34:20
12 say in the way the units at the refinery operate. 14:34:23
13 So even though they don't give direct -- even 14:34:29
14 though the people don't report to them, they give 14:34:33
15 direct instructions to operations and even 14:34:36
16 maintenance personnel about what should be done 14:34:39
17 today, what things are the priority. They 14:34:42
18 effectively run a small section of the refinery. 14:34:47
19 Q But you're saying the reliability change 14:34:52
20 OA did not do that? 14:34:54
21 A That is correct. 14:34:56
22 Q And why is that? 14:34:56
23 A It wasn't its job. 14:34:58
24 Q What was its job? 14:35:00
25 A I mean, I don't really have a job 14:35:02

1 description for it because it doesn't exist. 14:35:06

2 Q What were you doing on a day-to-day 14:35:09

3 basis? 14:35:11

4 A Whatever Austin wanted me to do. I 14:35:12

5 spent the first three or so months training the 14:35:15

6 new IEAR team lead and wrapping up some projects 14:35:19

7 that I was working on. I think I also got 14:35:26

8 assigned to an investigation, but it was just -- 14:35:31

9 it's kind of like whatever -- 14:35:34

10 Q Almost like special projects? 14:35:36

11 A Yeah. 14:35:38

12 Q Okay. Now, less than a year later 14:35:44

13 around October, 2020, that's when this big reorg 14:35:47

14 happened -- right? -- restructuring of the 14:35:49

15 business? 14:35:51

16 A That's -- that's when it rolled down to 14:35:51

17 my level, yeah. It began much earlier than that. 14:35:54

18 Q Okay. And are you aware that ten 14:35:57

19 percent of the employees were laid off? 14:35:58

20 A I am. 14:36:00

21 Q And -- 14:36:00

22 A I actually take issue with that number. 14:36:02

23 It's not ten percent were laid off. Ten percent 14:36:05

24 of the employee -- there was a reduction of ten 14:36:08

25 percent of the workforce. 14:36:10

1 Q And was that Austin Ruppert at the time? 15:48:49

2 A It was not. It was Greg Curtin. Austin 15:48:52

3 Ruppert had opted not to stay with the company 15:48:56

4 during the reorganization. 15:48:59

5 Q So you gave copies of this to Ms. Tse 15:49:01

6 and "Ms." -- Mr. Curtin; correct? 15:49:03

7 A Yes. 15:49:05

8 Q Anyone else? 15:49:05

9 A No. 15:49:07

10 Q Okay. And this is your resignation 15:49:07

11 letter; right? 15:49:09

12 A Yes. 15:49:10

13 Q And it states, among other things, you 15:49:11

14 appreciate all the opportunities you've been -- 15:49:13

15 you've given -- that Chevron has given you during 15:49:16

16 your time at Chevron Products Company and the 15:49:19

17 support you've received from the rest of the team; 15:49:20

18 right? 15:49:22

19 A Correct. 15:49:22

20 Q Okay. And so the letter doesn't say 15:49:23

21 anything about working with conditions so 15:49:25

22 intolerable that you had no choice but to quit; 15:49:28

23 correct? 15:49:28

24 A That is correct. 15:49:31

25 Q And/or that you felt like you were 15:49:31

1	forced to leave Chevron; correct?	15:49:33
2	A Correct.	15:49:35
3	Q And did you ever express those	15:49:35
4	sentiments in writing to anyone at Chevron?	15:49:36
5	A Not in writing.	15:49:39
6	Q Did you express them verbally?	15:49:40
7	A Yes.	15:49:40
8	Q To who?	15:49:43
9	A Greg Curtin, Austin Ruppert. I	15:49:45
10	expressed to them on several occasions that I felt	15:49:51
11	that my treatment at the company had been very	15:49:55
12	unfair and that I was considering leaving and --	15:49:57
13	yeah.	15:50:10
14	Q Mr. Ruppert left during the	15:50:10
15	reorganization event; right?	15:50:11
16	A Yes.	15:50:13
17	Q That was not quite a year but almost a	15:50:13
18	year before you resigned.	15:50:16
19	A Correct.	15:50:17
20	Q And so did you express this to him while	15:50:18
21	he was your supervisor or after he left?	15:50:20
22	A While he was my supervisor.	15:50:23
23	Q Anyone else?	15:50:26
24	A Nobody in a position that would have	15:50:28
25	done anything about it, no.	15:50:31

1 regard; Mr. Curtin? 15:51:28

2 A I laid out the jobs that I had applied 15:51:30

3 to and that, you know, certain things had been on 15:51:34

4 my career development path since I started at 15:51:36

5 Chevron and many people had made me many promises 15:51:39

6 and many people had said that they would do things 15:51:42

7 for me and help me out, if I did X or Y; and that 15:51:45

8 those things never came to fruition; and that I 15:51:50

9 see being placed back in the role that I was 15:51:54

10 placed in as just a continuation of that. 15:51:56

11 Q Okay. So you didn't say anything to him 15:52:00

12 about discrimination or retaliation? 15:52:02

13 A No. 15:52:10

14 Q Let me ask it a better way. Is it -- is 15:52:11

15 it true that you did not say anything to him about 15:52:14

16 discrimination or retaliation? 15:52:16

17 A That is true. 15:52:17

18 Q Okay. Did you say anything to 15:52:18

19 Mr. Ruppert about discrimination or retaliation? 15:52:19

20 A I believe I said something about 15:52:21

21 discrimination to Mr. Ruppert but not about 15:52:23

22 retaliation. 15:52:27

23 Q When did you say something about 15:52:28

24 discrimination to Mr. Ruppert? 15:52:30

25 A It would have been at the time when I 15:52:31

1 believed the discrimination occurred. 15:52:35

2 Q Is that age discrimination? 15:52:37

3 A No. That would have been disability 15:52:39

4 discrimination. 15:52:42

5 Q I see. Oh. So he was copied on that 15:52:43

6 e-mail to Mr. Powers? 15:52:45

7 A We would have to refer back to the 15:52:48

8 document as to whether he was copied or not, but I 15:52:50

9 know I told him in person. 15:52:52

10 Q So assuming he was copied on the e-mail, 15:52:55

11 you're saying you also told him in person? 15:53:00

12 A That is correct. 15:53:01

13 Q Okay. And what exactly did you say to 15:53:02

14 him in person? 15:53:04

15 A Just that I thought it was 15:53:05

16 discriminatory that they didn't have a good reason 15:53:06

17 for not letting me go to Escravos. 15:53:09

18 Q Anything else? 15:53:13

19 A I don't think so. No details. 15:53:14

20 Q Do you know whether he ever told anybody 15:53:15

21 else about that? 15:53:17

22 A I have no idea. 15:53:17

23 Q And so why didn't you say anything about 15:53:19

24 any of that in this resignation letter? 15:53:21

25 A The typical resignation letter doesn't 15:53:29

1 say anything bad about a company that you're 15:53:33
2 leaving, and I saw no benefit to writing it down 15:53:36
3 to people that really don't have anything to do -- 15:53:40
4 any power to affect what I was complaining about. 15:53:43
5 Q Did you talk to anyone else at Chevron 15:53:54
6 about your resignation? 15:53:56
7 A No. 15:53:56
8 Q And I'm not -- again, I'm not trying to 15:54:01
9 surprise. 15:54:03
10 Did you talk to Troy Tortorich? 15:54:04
11 A I don't believe I did, no. 15:54:06
12 MR. MUSSIG: I'll mark as Exhibit 18 a 15:54:19
13 document titled "voluntarily termination - 15:54:21
14 GO-439-1," Bates-numbered SNOOKAL-1143. 15:54:26
15 (Exhibit 18 was marked for 15:54:26
16 identification by the Certified 15:54:26
17 Shorthand Reporter.) 15:54:37
18 MS. LEAL: Thank you. 15:54:37
19 BY MR. MUSSIG: 15:54:38
20 Q Are you familiar with this document? 15:54:39
21 A I am. 15:54:41
22 Q Is it -- is that your signature in the 15:54:43
23 middle of the page? 15:54:44
24 A It is. 15:54:45
25 Q And you signed this on August 4, 2021? 15:54:47

1	A	I did.	15:54:49
2	Q	And this says:	15:54:51
3		"I wish to resign my	15:54:52
4		employment with the Chevron	15:54:53
5		Products Company effective	15:54:55
6		August 20, 2021, for the following	15:54:56
7		reasons: I am leaving for an	15:54:59
8		opportunity with significantly	15:55:01
9		increased responsibility."	15:55:02
10		There's no other stated reason for your	15:55:04
11		resignation; correct?	15:55:07
12	A	Correct.	15:55:08
13	Q	Is that true? You were leaving for an	15:55:08
14		opportunity with a significantly increased	15:55:10
15		responsibility?	15:55:12
16	A	It is a correct statement. Yeah.	15:55:13
17	Q	Did you discuss with anyone at Chevron	15:55:17
18		in this time period about anything with regard to	15:55:22
19		discrimination or retaliation?	15:55:27
20		MS. LEAL: Again, that he hasn't already	15:55:29
21		discussed today, I assume.	15:55:30
22		BY MR. MUSSIG:	15:55:30
23	Q	During -- during this -- during the	15:55:34
24		resignation --	15:55:36
25		MS. LEAL: Okay.	15:55:37

1 BY MR. MUSSIG: 15:55:37

2 Q -- in connection with the resignation? 15:55:37

3 A No. 15:55:39

4 Q And, again, why not? 15:55:45

5 A The same answer. There's no point in 15:55:49

6 putting it on this form which is just going to get 15:55:52

7 stuck in my file. They probably didn't even read 15:55:55

8 it. 15:55:58

9 MR. MUSSIG: 19. I'm going to mark as 15:56:14

10 Exhibit 19 a document entitled "exit interview." 15:56:16

11 (Exhibit 19 was marked for 15:56:16

12 identification by the Certified 15:56:16

13 Shorthand Reporter.) 15:56:16

14 BY MR. MUSSIG: 15:56:16

15 Q And you participated in an exit 15:56:36

16 interview with Ms. Tse before you left Chevron; 15:56:38

17 correct? 15:56:38

18 A I did. 15:56:42

19 Q And the interview was voluntary; 15:56:43

20 correct? 15:56:43

21 A Yes. 15:56:45

22 Q Do you know -- you might not know the 15:56:48

23 answer to this. 15:56:51

24 Do you know whether Chevron only 15:56:51

25 requests this type of exit interview when 15:56:52

1 Q Did you at some point say that you 16:12:29
2 needed to leave Chevron for your mental health? 16:12:31
3 A I did not; not to anyone at Chevron, no. 16:12:33
4 Q Do you feel like you did need to leave 16:12:38
5 Chevron for your mental health? 16:12:40
6 A Yes. 16:12:42
7 Q Why so? 16:12:43
8 A As someone that doesn't have a degree, 16:12:50
9 it's very difficult to make a career above a 16:12:53
10 technician level; right? 16:12:56
11 To get into engineering, to get into 16:12:57
12 management and leadership, to get into a 16:13:00
13 multinational oil corporation, all of these things 16:13:04
14 are not without a lot of head wind, if you don't 16:13:07
15 have a Bachelor's degree and not just a Bachelor's 16:13:10
16 degree but in a specific field; right? 16:13:15
17 They want an engineering degree almost 16:13:16
18 exclusively. 16:13:25
19 I have always worked very hard to add as 16:13:26
20 much value in whatever role I have at whatever 16:13:30
21 company I'm at, and I take a lot of personal 16:13:33
22 responsibility for my work ethic and the 16:13:36
23 contributions that I make, and I have always seen 16:13:39
24 that rewarded in one way or another by the 16:13:46
25 companies I worked for. 16:13:48

1 It was always a small struggle at 16:13:55
2 Chevron to make progress, and I attributed that to 16:13:57
3 the size of the company. It is the largest 16:14:00
4 company that I had worked for. 16:14:03

5 But as time went on, especially after 16:14:07
6 the Nigeria -- or after the -- the EGTL, you know, 16:14:09
7 revocation, the -- the subsequent inability to be 16:14:20
8 placed into roles that I felt at least 16:14:26
9 competitive, if not overqualified in some cases, 16:14:32
10 certainly to the candidates that were selected -- 16:14:35
11 I felt like I wasn't being rewarded for my 16:14:39
12 contributions and that, you know, it -- it caused 16:14:41
13 me a lot of -- I don't know -- a lot of grief 16:14:45
14 and -- and -- and difficulty in -- in figuring out 16:14:56
15 what I was; right? 16:15:04

16 So it's like -- it's like -- almost like 16:15:05
17 it kind of twisted my identity a little bit; 16:15:08
18 right? 16:15:12

19 Like if I'm this person that works hard 16:15:12
20 and makes it anyway, even though I don't have all 16:15:15
21 the tools that I should have, I can make it work, 16:15:17
22 and then all of a sudden I can't make it work and 16:15:20
23 just it keeps happening and keeps happening and 16:15:23
24 keeps happening, it got to the point where, you 16:15:26
25 know, I started suffering from depression. And -- 16:15:31

1 and so I did seek a therapist and then counseling, 16:15:34
2 and they, you know, through -- through 16:15:42
3 conversations, basically, that's how we identified 16:15:45
4 that a lot of my personality and my self-worth is 16:15:48
5 tied up in my job and advancement and -- and, you 16:15:51
6 know, rewards that I get from that, and it was 16:15:59
7 really almost my whole world at that point. 16:16:02

8 And so, you know, she encouraged me to 16:16:10
9 try to separate that out some -- right? -- so 16:16:14
10 that's part of what my therapist and I worked on, 16:16:17
11 getting side hobbies and doing other things. But, 16:16:21
12 you know, it never really fully separated from 16:16:24
13 work. 16:16:27

14 And then once the reorganization 16:16:28
15 happened and I wasn't -- I didn't get any of the 16:16:31
16 jobs that I put in for and they basically said, 16:16:41
17 "Take this old job you already had or quit," which 16:16:44
18 is similar to something that they did to me in 16:16:48
19 2013 when I left the analyzer role and they're 16:16:52
20 like, "We need you in technical, so take this 16:16:55
21 technical job. You're not going to be in 16:16:58
22 maintenance anymore." It's just like -- it was 16:17:01
23 just like repeating. And that's when my therapist 16:17:06
24 started suggesting that I should probably try to, 16:17:08
25 you know, maybe look for other work. 16:17:10

1 Q Well, let me ask: So when did you begin 16:17:13
2 seeing a therapist? 16:17:18
3 A I believe it was sometime in 2020. 16:17:21
4 Q During COVID? 16:17:25
5 A It was during COVID, yes. 16:17:26
6 Q And who is the therapist? 16:17:29
7 A It -- I talked to a few people before 16:17:30
8 finally we settled on one therapist. It was 16:17:34
9 Eileen Baer, I believe her name was. 16:17:37
10 Q How do spell Baer? "B-e-a-r"? 16:17:40
11 A I'm not sure how you -- no. It's 16:17:43
12 like -- 16:17:47
13 Q Bayer aspirin -- 16:17:47
14 A Maybe, yeah. 16:17:48
15 Q -- B-a-y-e-r? 16:17:49
16 A I -- I think it was "B-e-a" -- or 16:17:50
17 B-a-e-r; something like that. It wasn't -- it -- 16:17:55
18 it's in the -- 16:17:57
19 Q All right. 16:17:58
20 A It's in the records. 16:17:59
21 Q Are you still seeing her? 16:18:02
22 A No. 16:18:03
23 Q When did you stop seeing her? 16:18:05
24 A Shortly after I resigned from Chevron. 16:18:07
25 Q Why did you stop seeing her? 16:18:09

1 A Most of what we were talking about 16:18:12
2 was -- at that point, anyway, it was Chevron 16:18:14
3 and -- and being -- you know, ways to cope with 16:18:21
4 continued disappointment that was happening at 16:18:23
5 Chevron. I wasn't really discussing other issues 16:18:26
6 that I was having with her. 16:18:32

7 You know, the -- when I didn't go to 16:18:36
8 Escravos, it caused a lot of difficulty in my 16:18:44
9 family with my wife and my son, but it wasn't -- 16:18:46
10 it wasn't the kind of thing that I needed therapy 16:18:55
11 for; right? 16:19:02

12 My wife was upset. My son was upset. 16:19:03
13 We had him in a special school for some 16:19:06
14 developmental disabilities that he has and for 16:19:12
15 some mental health disabilities that he has, and 16:19:14
16 we weren't going to be able to send him to that 16:19:21
17 school anymore without the money from Nigeria. 16:19:24

18 But I didn't need the therapist to help 16:19:31
19 me talk to my son and my wife about that; right? 16:19:33

20 We had communication, and we were 16:19:37
21 working through that on our own. 16:19:39

22 She was really helping me with the 16:19:40
23 continued negative feelings that I was having just 16:19:47
24 by working for Chevron; right? 16:19:52

25 Q Because you weren't being promoted? 16:19:54

1 A Right, and watching other people be 16:19:56
2 promoted and essentially, in my mind, being 16:19:58
3 demoted and then not being particularly valued for 16:20:01
4 the work that I was doing even in the new position 16:20:04
5 that I was in. It wasn't new. In the position 16:20:07
6 that I was put back in. They held a -- an 16:20:13
7 employee, you know, like survey, engagement 16:20:22
8 survey, and there were a lot of feedback and a lot 16:20:25
9 of stuff, and Chevron wasn't really going to 16:20:27
10 address that. 16:20:30

11 And I -- I felt like, you know, that 16:20:31
12 made it difficult for me in that, you know, my 16:20:34
13 group had had a hard time through COVID and they 16:20:37
14 had had a hard time through the reorganization, 16:20:42
15 and it -- it didn't seem like Chevron was going to 16:20:45
16 help them any more than me. And so it just, you 16:20:48
17 know, was almost a daily -- daily thoughts about 16:20:53
18 how -- how much it wasn't that great to work there 16:21:00
19 anymore. 16:21:02

20 Q Did you see any other mental health 16:21:02
21 providers or -- 16:21:05

22 A I also took Cymbalta at the time, so I 16:21:07
23 had a psychiatrist just for prescribing. 16:21:12

24 Q And who was that? 16:21:19

25 A I don't re -- I don't recall her name. 16:21:19

1 STATE OF CALIFORNIA)
) SS.
2 COUNTY OF VENTURA)

3 I, John M. Taxter, a California Certified
4 Shorthand Reporter, Certificate No. 3579, a
5 Registered Professional Reporter, do hereby
6 certify:

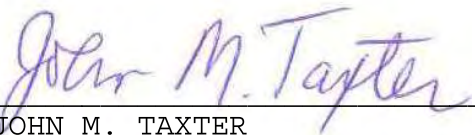
7 That the foregoing proceedings were taken
8 before me at the time and place therein set forth,
9 at which time the deponent was put under oath by
10 me; that the testimony of the deponent and all
11 objections made at the time of the examination
12 were recorded stenographically by me and were
13 thereafter transcribed; that the foregoing is a
14 true and correct transcript of my shorthand notes
15 so taken.

16 I further certify that I am neither counsel
17 for nor related to any party to said action.

18 The dismantling, unsealing, or unbinding of
19 the original transcript will render the Reporter's
20 Certificate null and void.

21 Pursuant to Federal Rule 30(e), transcript
22 review was requested.

23 Dated May 22, 2024.

24 
25 JOHN M. TAXTER
California Certified Shorthand
Reporter No. 3579, RPR

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I, John M. Taxter, Certified Shorthand Reporter,
CSR No. 3579, hereby certify:

The foregoing is a true and correct copy of the
original transcript of the proceedings taken by me
as thereon stated.

Dated: May 23, 2024



John Taxter, CSR No. 3579